

Indiana Department of Environmental Management

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue * Indianapolis, IN 46204

(800) 451-6027 * (317) 232-8603 * www.idem.lN.gov

Michael R. Pence Governor Carol S. Comer Commissioner

December 6, 2016

Tonya Marks, Auditor Noble County 101 N Orange St Rm 220 Albion, Indiana 46701

Dear County Auditor:

Re: Geothermal Heating/Cooling Device

Pursuant to IC 6-1.1-12-34 Property Tax Deduction for Brent W. & Sarah J. Franke

2794 E Waits Rd

Kendallville, Indiana 46755 Parcel Number: 009-100236-00

The above referenced claim for a property tax deduction, attached State Form 18865 and supplemental attachments, submitted by the above referenced applicant, have been reviewed by this Office in accordance with IC 6-1.1-12-35.5. Please be advised that the heating/cooling system outlined in the claim for exemption (18865) qualifies as a geothermal system as defined in IC 6-1.1-12-34. The total amount of this claim shall be pursuant to IC 6-1.1-12-34(b). This certification does not include a determination as to the total actual or depreciated value of the claimed property.

This certification is for the life of the installed equipment and does not need to be requested on an annual basis. However, when the equipment is no longer in service, the owner of the equipment for which this certification is made must give written confirmation to the assessor of the township or county in which the equipment is installed.

Additionally, this certification does not include a determination as to the timeliness of the claim nor whether the property claimed for exemption is real or personal property.



If you have any questions concerning this matter, you may contact Ms. Donna Palmer at (317) 233-0478.

Sincerely,

Lance Myers, Section Chief

Operations Section Office of Water Quality

Certification/Approval Number: 161139 Brent W. & Sarah J. Franke

STATEMENT FOR DEDUCTION OF ASSESSED VALUATION

(Attributed to Solar Energy System / Wind, Geothermal or Hydroelectric Power Device)
State Form 18865 (R6 / 12-10)
Prescribed by the Department of Local Government of Local Government of Local Government of Local Government

FORM SES / WPD

1818	WATER A Prescribed by the Department of Local Government Finance							
	IS: To be filed in person or by mail by the owner of such property with the County Auditor of the county in which the property is located.							
FILING DATES:	(1) Real Property: Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year.							
	(2) Mobile/Manufactured Home assessed under IC 6-1.1-7: Must be completed, dated, and filed during (1) Mobile/Manufactured Home assessed under IC 6-1.1-7: Must be completed, dated, and filed during (1) Mobile (2) Mobile (2) Mobile (3) Mobile (3) Mobile (4) Mobile							
(IC 6-1.1-12-26; 6	S-1.1-12-27; 6-1.1-12-2	9; 6-1.1-12-30; 6-1.1-1	2-33; 6	5-1.1-12-34; 6-1.1	1-12-35; 6-1.	1-12-36)	nec 02	2016
Department of En	wironmental Managem	9; 6-1.1-12-30; 6-1.1-1 hermal or hydroelectric ent pursuant to IC 6-1.	1-12-3	5				- 6
All claims for a deduction filed on a solar energy system or device must be accompanied by sufficient proof of the owner support pocket expenditures in order to determine deduction amount.								
CERTIFICATION STATEMENT								
I (We), Franke Brent W & Sarah J certify that I (we) own or am (are) buying on								
contract the following described real property or mobile/manufactured home for which a								
Solar Energy System Wind Power Device Geothermal Device Hydroelectric Device								
deduction from assessed valuation is here by claimed in								
The system or device was installed on the following described property on								
PROPERTY DESCRIPTION								
Taxing District (city, town, township) 57-09-11-100-007.000-003 Township Allen							Legal description or key number Pt E1/2 Ne1/4 Sec 11 27.51a	
If a deduction was allowed last year, have there been any changes in the property?							Parcel number 009-100236-00	
Address of owner (number and street, city, state, and ZIP code) 2794 E Waits Rd. Kendallville IN 46755								
I (We) hereby certify that the above statement is true, correct and complete.							Date (month, day, year)	
FOR AUDITOR'S USE ONLY							PREVIOUS YEAR	PRESENT YEAR
							 \$	\$
1. Total assessed value of property including Solar Energy / Wind Power / Geothermal / Hydroelectric device. 2. For solar energy system only: MINUS out-of-pocket expenditures for components and installation labor							\$	\$
For Wind Power / Geothermal / Hydroelectric device: MINUS assessed valuation of property without device.							\$	\$
3. Difference (Deduction Allowable)							\$	\$
Signature of Auditor							Date (month, day	, year)
I have verified the above statement and found it to be true and correct.								
Assessor of county, township . Signature of A				sessor			Date (month, day, year)	
	3 1550 500 500 1550 1550 1550 1550 1550		- 600 000					
		EIPT FOR STATEME						E
ATTRIBUTED TO SOLAR ENERGY SYSTEM / WIND POWER / GEOTHERMAL OR HYDRO Name of owner							Parcel number	
Description of property in county							Legal description or key number	
Signature of Aud	itor			Township			Date filed (month, day, year)	
	nits a class D felony if spect pursuant to IC 6	he makes and subscrit	oes a p	L property tax return	n statement	or document th	at he does not beli	eve is correct in

Send to: Indiana Department of Environmental Management (send with: copy of Office of Water Quality the Geothermal Attention: Donna Palmer 100 North Senate Avenue Room 1255 Indianapolis, IN 46204 Noble County Homeowner: Address: 194E City & Zip 1260 667-45 Daytime phone number (260) <u>385-5914</u> Geothermal Heating and Cooling System Base Rates imate Master Model # TZ VO48 AG DO6NRTS Serial # Please circle the type of unit, tonnage and distribution of the Geothermal Unit HORIZONTAL CLOSED LOOP SYSTEM 2 ton 7900 2.5 ton 10100 3 ton 12400 3.5 ton 14600 4 ton 16800 5 ton 20700 24700 6 ton VERTICAL CLOSED LOOP SYSTEM 9400 2 ton 11900 2.5 ton 14600 3 ton 3.5 ton 17200 4 ton 19800 5 ton 24500 6 ton 29200 OPEN DISCHARGE OPEN LOOP SYSTEM 2 ton 6800 2.5 ton 8600 3 ton 10600 3.5 ton 12400 14200 4 ton 5 ton 17400 6 ton 20600 RETURN WELL OPEN LOOP SYSTEM 2 ton 7400 2.5 ton 9300 3 ton 11200 3.5 ton 13000 4 ton 14900 5 ton 18100

6 ton

21200

Application)

Brent & Sovah Franke 2994 E. Waits Rd. Kerdaliville IN 46755

IDEM-Office of Water Quality 100 North Senate Ave Room 1255 Tadionnamis IN 46204 Attention: Donna Palmer